UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No. 034.0002US

EXPRESS MAIL #ER311519174US

TO THE COMMISSIONER FOR PATENTS:

Transmitted herewith is the patent application of ( ) application identifier or (X) first named inventor, Lien-Wen Chang. entitled, for a(n):

## PACKAGE STRUCTURE FOR LIGHT EMITTING DIODE AND METHOD THEREOF

(X)	Origina	nginal Patent Application.					
( )	( )	ting Application (prior application not abandoned):  Continuation ( ) Divisional ( ) Continuation-in-part (CIP)  of prior application No: Filed on:  A statement claiming priority under 35 USC § 120 has been added to the specification.					
Enclo	sed are:	·					
	(X)	Specification: 16 Total Pages.					
	(X)	Claims: 7 Total Pages.					
	(X) Claims: 7 Total Pages. (X) Abstract: 1 Total Pages.						
	(X) Formal Drawing(s): 11 Total Sheets.						
	() Informal Drawing(s):Total Sheets.						
	(X) Oath or Declaration:						
	(X) A Newly Executed Combined Declaration and Power of Attorney:						
	(X) Signed. ( ) Unsigned. ( ) Partially Signed. ( ) A Copy from a Prior Application for Continuation/Divisional (37 CFR § 1.63(d)).						
( ) Incorporation by Reference. The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied, is considered as being part of the disclosure of the accompanying application and is hereby incorporated herein by reference.							
	( ) Signed Statement Deleting Inventor(s) Named in the Prior Application. (37 CFR § 163(d)(2)).						
	( ) Power of Attorney.						
	() Associate Power of Attorney.						
	<ul> <li>(X) A check in the amount of \$\frac{\$1,166.00}{1,166.00}\$ for the Fees associated with this filing.</li> <li>( ) Preliminary Amendment.</li> </ul>						
	( ) A Duplicate Copy of this Form for Processing Fee Against Deposit Account.						
	(X) A Certified Copy of Priority Documents (if foreign priority is claimed).						
	( ) Information Disclosure Statement, Form PTO/SB/08A, listing References.						
	(X) Return Receipt Postcard.						
	(X) Assignment and Recordation Cover Sheet.						
	()	Other:					

		CLAIMS AS FILED	)	
FOR	NO. FILED	NO. EXTRA	RATE	FEE
Total Claims	35	15	\$18.00	270.00
Independent Claims	4	1	\$86.00	86.00
Multiple Dependent Clai	\$0			
Assignment Recording F	\$40.00			
Basic Filing Fee	\$770.00			
			Total Filing Fee	\$1,166.00

to Deposit Account 50-2091 pursuant to 37 CFR § 1.25. At any time during the pendency of this application, please charge any fees required or credit any overpayment to Deposit Account 50 -2091.

Respectfully submittee

Brett A. Carlson Reg. No. 39,928

Date: February 2, 2004

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